P.4

## USE THIS FORM AS MASTER AND COMPLETE FOR ALL PARTICIPATING DIRECT ACCTS MARCH 1996 DPC FORM **Distributor Promotion Coverage**

## DORAL .30¢ Off 1-Pack / #600096

618 944 5894

Please complete and return this form to the ROU by no later than: April 19, 1996

HERB BOTTLE

MGR's NAME

**REGION ALLOCATION: 791 SKUS ALLOCATION** (Item #502910) PACKED 5 DISPLAYS / SKU

Customer Letters to participating account

WILL NEED THE FOLLOWING PRODUCT / DISPLAYS ORDERED TO THE LISTED

**DIRECT ACCOUNT(S):** 

PITTSTON COND-

12

#6067-1407

DIRECT ACCOUNT

NoJ SKUS (#502910)

PRODUCT ARRIVAL DATE:

(MGR. FILL IN)

DORAL BRAND STYLES / NUMBER OF CASES NEEDED

FF 12M	FF Bx 6M	FF 100 12M	FFM 100 6M	LT 12M	LT Bx 6M	LT 100 12M	LT MN 6M	<b>L</b> тМ 100 12м	ULT LT 6M	U LT 100 12M	NON- FIL 6M

VILLAGE SMEET SHOP

085824

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6067-1410

DIRECT ACCOUNT

No./ SKUS (#502910)

PRODUCT ARRIVAL DATE: 3-7-96

(MGR. FILL IN)

DORAL BRAND STYLES / NUMBER OF CASES NEEDED:

FF 12M	FF Bx 6m	FF 100 124	FF MN 6m	FFM 100 8M	LT .12M	LT BX 6M	L <sub>T</sub> 100 12M	LT MN 6M	LTM 100 12m	ULT LT 6M	U LT 100 12M	Non- FIL 6M

MAIL / FAX THIS FORM TO ROU, ATTN: JUDY 1/98